

# FEC FORM 9

## 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

### 1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name

CAMPAIGN MONEY WATCH

(b) Address (number and street) ☐ check if different than previously reported

1320 19TH STREET NW SUITE M-1

(c) City, State and ZIP Code

WASHINGTON

DC

20036

(d) Name of Employer or Principal Place of Business

n/a

(e) Occupation

n/a

### 2. FEC Identification Number

C C30000160

### 3. Is This Statement

☒

New

or

☐

Amended

### 4. Covering Period

M M / D D / Y Y Y Y  
0 1 / 0 1 / 2 0 0 7

through

M M / D D / Y Y Y Y  
0 9 / 1 2 / 2 0 0 8

### 5. (a) Date of Public Distribution(s)

M M / D D / Y Y Y Y  
0 9 / 1 2 / 2 0 0 8

(b) Communication Title Scratch

### 6. The filer is a(n): (a) ☐ Individual (b) ☐ Unincorporated Organization (c) ☐ Qualified Nonprofit Corporation (11 CFR 114.10)

(d) ☒ Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15(e) ☐ Other, specify: \_\_\_\_\_

### 7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?

Yes ☒No ☐

### 8. Custodian of Records

(a) Name

Gail Gomez

(b) Address (number and street)

c/o Campaign Money Watch

(c) City, State and ZIP Code

Washington

DC

20036

(d) Name of Employer or Principal Place of Business

Public Campaign Action Fund

(e) Occupation

Office Manager

### 9. Total Donations This Statement

655000.00

### 10. Total Disbursements/Obligations This Statement

166332.53

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

David Donnelly

SIGNATURE Electronically Filed by David Donnelly

DATE 09/13/2008

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. 437g.

**List of Person(s) Sharing/Exercising Control**

(use additional pages as necessary)

PAGE 2 / 5

**11. Person(s) Sharing/Exercising Control**

|           |  |                                    |  |
|-----------|--|------------------------------------|--|
| <b>A.</b> | (a) Name   | <b>Transaction ID :</b> F91.000001 |  |
|           | David Donnelly   |                                    |  |
|           | (b) Address (number and street)<br>c/o Campaign Money Watch 1320 19th Street NW, Suite M-1<br>1320 19th Street NW, Suite M-1 |                                    |  |
|           | (c) City, State and Zip Code   |                                    |  |
|           | Washington   | DC                                 | 20036                                  |
|           | (d) Name of Employer or Principal Place of Business  |                                    | (e) Occupation                         |
|           | Public Campaign Action Fund  |                                    | Director, Campaign Money Watch project |

Image# 28992138322  
**SCHEDULE 9-A**  
**Donation(s) Received**

PAGE 3 / 5

**A.** Full Name of Donor

John Hunting

Mailing Address of Donor

161 Ottawa Ave

City

State

Zip

Grand Rapids

MI

49503

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 8

Amount

75000.00

Transaction ID : F92.000001

**B.** Full Name of Donor

Campaign to Defend America

Mailing Address of Donor

1850 K Street

City

State

Zip

Washington

DC

20036

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

Amount

50000.00

Transaction ID : F92.000002

**C.** Full Name of Donor

David Bonderman

Mailing Address of Donor

301 Commerce Street

City

State

Zip

Ft. Worth

TX

76102

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 8

Amount

125000.00

Transaction ID : F92.000003

**D.** Full Name of Donor

Deborah Salkind

Mailing Address of Donor

10 Rincon Ct

City

State

Zip

Santa Cruz

CA

95060

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 8

Amount

30000.00

Transaction ID : F92.000004

**E.** Full Name of Donor

John Hunting

Mailing Address of Donor

161 Ottawa Ave NW

City

State

Zip

Grand Rapids

MI

49503

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Amount

75000.00

Transaction ID : F92.000005

**SUBTOTAL** of Donations This Page (optional).....

355000.00

**TOTAL** This Period (last page this line number only).....  
(carry total from last page to Line 9)

**A.** Full Name of Donor

American Federation of State, County and Municipal Employees

Mailing Address of Donor

1625 L Street NW

City

State

Zip

Washington

DC

20036

Date of Receipt

M M  
0 7

D D  
2 3

Y Y Y Y  
2 0 0 8

Amount

300000.00

Transaction ID : F92.000006

**SUBTOTAL** of Donations This Page (optional).....

300000.00

**TOTAL** This Period (last page this line number only).....  
(carry total from last page to Line 9)

655000.00

**SCHEDULE 9-B****Disbursement(s) Made or Obligations**

|   |  |   |  |  |  |
|---|--|---|--|--|--|
| <b>A.</b> Full Name (Last, First, Middle Initial) of Payee<br>MacWilliams Kirchner Sanders and Partners     |  |   |  | Date of Disbursement or Obligation<br><div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y<br/>0 9 / 1 0 / 2 0 0 8</div> </div>                                  |  |
| Mailing Address of Payee<br>1660 L Street NW  |  |   |  | Amount<br><div style="border: 1px solid black; padding: 2px; text-align: right;">166332.53</div>   |  |
| City State Zip Code<br>Washington DC 20036  |  | Communication Date<br><div style="display: flex; justify-content: space-around;"> <div>M M / D D / Y Y Y Y<br/>0 9 / 1 2 / 2 0 0 8</div> </div> |  |  |  |
| Name of Employer Occupation<br>n/a n/a  |  | <b>Transaction ID :</b> F93.000001  |  |  |  |
| Purpose of Disbursement (including title(s) of communication(s))<br>Production/placement of TV ad           |  |   |  |  |  |
| Name of Federal Candidate<br>Ted Stevens  |  | Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President               |  | State: AK District: _____<br>Disbursement/Obligation For: 2008<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) _____ |  |
| F94.000002  |  |   |  |  |  |
| Name of Federal Candidate   |  | Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President                          |  | State: _____ District: _____<br>Disbursement/Obligation For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) _____              |  |
| Name of Federal Candidate   |  | Office Sought: <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President                          |  | State: _____ District: _____<br>Disbursement/Obligation For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) _____              |  |
|   |  |   |  |  |  |
| <b>SUBTOTAL</b> of Disbursement/Obligation This Page (optional) .....                                       |  |   |  | <div style="border: 1px solid black; padding: 2px; text-align: right;">166332.53</div>   |  |
| <b>TOTAL</b> This Period (last page this line number only) .....<br>(carry total from last page to line 10) |  |   |  | <div style="border: 1px solid black; padding: 2px; text-align: right;">166332.53</div>   |  |